



**State of Rhode Island
Office of the Secretary of State**

Fee: \$20.00

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040

**Non-Profit Corporation
Annual Report**

Filing Period: February 1 - May 1

In accordance with R.I.G.L. 7-6-94, each corporation failing or refusing to file its annual report within the time prescribed by law (R.I.G.L. 7-6-91) is subject to a penalty fee of \$25.00.

ANNUAL REPORT YEAR - ENTER THE CURRENT YEAR 2025: 2025

1. Corporate ID No. 000141161

2. Name of Corporation CITY VIEW COMMUNITY CORPORATION

3. State of Incorporation

State: RI

NAICS CODE

Using the dropdown labeled NAICS Code below, select the classification title that describes the primary type of activity in which your entity engages. The box to the right of the dropdown will populate a NAICS Code based on the chosen selection. If the NAICS Code is known, enter it into the box on the right. For further assistance with selecting a classification [click here](#).

NAICS Code

624229

4. Principal Office Address

No. and Street: 99 GOLDSMITH AVENUE

City or Town: EAST PROVIDENCE

State: RI

Zip: 02914

Country: USA

5. Brief Description of the Character of the Affairs Conducted in Rhode Island

TO PROVIDE ASSISTANCE AND BRING RELIEF TO INDIVIDUALS OF LOW AND MODERATE INCOME BY PROVIDING DECENT, SAFE, SANITARY AND AFFORDABLE HOUSING THROUGH VARIOUS AND SPECIFIC PROGRAMS

6. Names and Addresses of the Officers and Directors:

All Directors and Officers must be listed individually. The number of DIRECTORS of a Rhode Island Corporation shall not be less than 3.

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
TREASURER	ROSE OTT	118 SHERWOOD DRIVE PORTSMOUTH, RI 02871 USA
SECRETARY	ROSE OTT	118 SHERWOOD DRIVE PORTSMOUTH, RI 02871 USA
VICE PRESIDENT	JOHN FARIA	20 ROWLEY ST EAST PROVIDENCE, RI 02914 USA
DIRECTOR	FIORELLA CLARK	926 HAMMET ROAD COVENTRY, RI 02816 USA
DIRECTOR	ROSE OTT	118 SHERWOOD DRIVE POTSMOUTH, RI 02871 USA
DIRECTOR	JOHN FARIA	20 ROWLEY ST EAST PROVIDENCE, RI 02914 USA

7. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER
Changes Require Filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-78

ROSE OTT 99 GOLDSMITH AVENUE EAST PROVIDENCE , RI 02914

8. This report must be signed by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver, or Trustee.

Signed this 23 Day of January, 2025 at 8:50:45 AM by the authorized person. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-6.*

By FIORELLA CLARK
Signature of Authorized Person

Form No. 631
Revised 09/07

© 2007 - 2025 State of Rhode Island
All Rights Reserved